

# CLAIMS ONLY

SERIAL NO.

FILING DATE

APPLICANT(S)

## CLAIMS

	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
1						
2		1				
3		1				
4		1				
5	1					
6		1				
7		1				
8	1					
9		1				
10		1				
11	1					
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49						
50						
TOTAL IND.	14		↓		↓	
TOTAL DEP.	9		↓		↓	
TOTAL CLAIMS	2					

*	IND.	DEP.	*	IND.	DEP.	*	IND.	DEP.
51								
52								
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100								
TOTAL IND.			↓		↓		↓	
TOTAL DEP.			↓		↓		↓	
TOTAL CLAIMS								

\* MAY BE USED FOR ADDITIONAL CLAIMS OR AMENDMENTS